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Docket No.: 16356.835 (DC-05443) Customer No.: 000027683

## HE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Schlesener, Maria, et al.

Serial No.

10/720,713

Filed:

November 24, 2003

For:

VERTICALLY DOCKING AN INFORMATION

HANDLING SYSTEM TO A MEDIA SLICE

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Group Art Unit: 2835

Examiner: Edwards, Anthony Q.

Mail Stop: Amendment Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

In response to the Office action dated October 5, 2005, enclosed are the following regarding the aboveidentified patent application:

- 1. Amendment and Request for Reconsideration Under 37 CFR §1.111;
- 2. Return postcard; and
- Transmittal letter.

[ ] Small entity status of this application has been established by a previously submitted verified statement under 37 C.F.R. §§ 1.9 and 1.27.

[X] No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) (Col. 3)		SMALL ENTITY			OTHER THAN A SMALL ENTITY	
			HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	<u>OR</u>	RATE	ADDIT. FEE
TOTAL	18	minus	24	= 0	x 25	\$	OR	x 50	\$
· INDEP	3	minus	3	= 0	x 100	\$	OR	x 200	\$
[ ]	FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+ 180	\$	OR	+ 360	\$
					TOTAL	\$	OR	TOTAL	\$

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

<sup>\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

<sup>\*\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

PATENT

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l J	riease charge Deposit Account No. [00-1394 Flab] in the amount of \$							
[ ]	A check in the amount of \$ is attached.							
[X]	The Commissioner is hereby authorized to charge payment of the following fees associated with							
	this communication or credit any overpayment to Deposit Account No. [08-1394 H&B, Order No.							
	16356.835 (DC-05443)].							
[X]	Any additional filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims.							
	Any patent application processing fees under 37 C.F.R. §1.17.							
	A copy of this sheet is enclosed.							

Disease shares Deposit Associat No. [00.1204 USD] in the amount of C

Respectfully submitted,

Joseph R. Mericher Registration No.: 56,822

Date: 1-5-06 HAYNES AND BOONE, LLP 901 Main Street, Suite 3100

Dallas, TX 75202-3789 Phone: 512/867-8407 Facsimile: 214/200-0853

ipdocketing@haynesboone.com

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

on

Date

Susan C. Lien

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Examiner: Edwards, Anthony Q.

Group Art Unit: 2835

## **AMENDMENT AND REQUEST FOR RECONSIDERATION UNDER 37 CFR 1.111**

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

The present paper is being submitted in response to the Office Action dated October 5, 2005, in the above-identified application.

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## **INTRODUCTORY COMMENTS**

Claims 1, 12 and 23 are amended, claims 7, 9, 18 and 20 are canceled, and claims 1-6, 8, 11-17, 19 and 22-24 remain in the application. Re-examination and reconsideration of the application, as amended, are requested.